"CASHIER USE ONLY"			

## STATE OF IOWA

# RENEWAL FOR GROUNDWATER PROFESSIONAL CERTIFICATION

#### APPLICANT INFORMATION:

Applicant Name:  Groundwater Certification Number:	Company Name:		
Home Mailing Address:  City:  State:  Zip:	Company Mailing Address:  City:  State: Zip:		
Home Telephone Number: ( )	Company Telephone: ( )		
E-Mail Address: (Please Print Clearly)			

### **CONTINUING EDUCATION REQUIREMENTS:**

Twelve hours of approved continuing education must be received during each two-year certification period. Please list below any continuing education courses you have completed that may be applicable for the 2004-2005 period. Provide the name of the course, the institution where you received the course and the number of hours. A copy of each course completion certificate must be attached to this form. (NOTE: The two-day RBCA training will satisfy the continuing education mandate if completed as required in 2004-2005; no additional continuing education would be required for this period.)

Course Name & Date Completed	<u>Institution</u>	<u>Hours</u>
	<del></del>	
	<del></del>	

## **RENEWAL FEE:**

A check or money order payable to the Department of Natural Resources must accompany each renewal application. The renewal fee is two hundred dollars (\$200) every two (2) years, <u>and is not refundable</u>. To ensure your certification does not lapse, the renewal application must be postmarked by **December 1, 2005**. Please remit the fee, completed renewal application, and required information to:

Iowa Department of Natural Resources Wallace State Office Building 502 E Ninth Street Des Moines, IA 50319-0034

Telephone: 515/281-8865

\_\_\_\_\_ Enclosed is the renewal fee of \$200 for 2006 and 2007.

SIGNATURE CERTIFYING INFORMATION:

I certify that the information on this renewal application is true. I understand that any misrepresentation can result in revocation of the certification and civil and criminal penalties.

Signature Date